SCHEDULE E (FEC Form 3X)	
ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF FORM 3X
NAME OF COMMITTEE (In FUII)	FEC IDENTIFICATION NUMBER ▼
Veterans for a Strong Mnerica Action	GOVEREQUESTED!
Check If 24-hour report 48-hour report New report Amends repo	Party of the state
Full Name (Last, First, Middle Initial) of Payee	Date
Results Unlimited 11	05 IZ 2012
City State Zip Code	Amount
Minot ND 58701	Office Sought: House State: \( \)
Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District:
Rick Bero	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
	10000
Maling Address	Amount
City State Zip Ccde	
Purpose of Expenditure  Category: Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expanditure:	President  Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	· [35,000.00]
(b) SUBTOTAL of Uniternized Independent Expanditures	
(b) SUBTOTAL of Uniternized Independent Expenditures	• 35,000.00
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent o	not made in cooperation, consultation, or concert
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	not made in cooperation, consultation, or concert
(c) TOTAL Independent Expenditures	not made in cooperation, consultation, or concert